Correction

Samuel M, Sivakuma P, West A. Ambulatory care of primary spontaneous pneumothorax with a Pneumostat device – cost effective and safe. *Thorax* 2015;70:A166. doi:10.1136/thoraxjnl-2015-207770.315

Corrections have been made to the ‘Results’ section of this abstract. The changes are in bold.

Results

73 patients presented with a PSP 34 patients required chest tube drainage, **25** of which were managed as an outpatient with a *Pneumostat*. The median LOS in the outpatient group was 1.0 day (IQR 0.0–2.0 days) vs **4.0** days (IQR 2.0–7.0 days) in the inpatient group. A total of 99 bed days were saved using the device. Based on a cost of £25.70 per *Pneumostat* and £312 per bed day, the overall saving was **£30,245.50**. Patients who required thoracic surgery were kept on the “inpatient waiting list” and could be admitted directly from home.

In the outpatient group, there was 1 drain site infection, 1 drain displacement and 1 patient failed to attend follow-up but returned a week later with a resolved pneumothorax.

Thorax 2016;**71**:266. doi:10.1136/thoraxjnl-2015-207770.315corr1